

Department For Behavioral Health, Developmental and Intellectual Disabilities
Administration and Financial Management
Rate Notice

Facility: Outwood

2018

Nursing Cost

| | | | |
|----|--|----|--------------|
| 1. | Total Allowed Nursing Cost | \$ | 5,855,187.00 |
| 2. | Trending Factor | | 1.0320000 |
| 3. | Trended Nursing Cost | \$ | 6,042,552.98 |
| 4. | Indexing Factor | | 1.0280000 |
| 5. | Indexed Nursing Cost | \$ | 6,211,744.46 |
| 6. | Patient Days | | 13,263 |
| 7. | Nursing Services Per Diem Payment Rate | \$ | 468.35 |

All Other Cost

| | | | |
|-----|---|----|--------------|
| 1. | Other Care Related Costs | \$ | 1,047,253.00 |
| 2. | Other Operating Costs | \$ | 3,843,209.00 |
| 3. | Indirect Ancillary Costs | \$ | 355,565.00 |
| 4. | Total All Other Costs (Other Than Capital) - calculated | \$ | 5,246,027.00 |
| 5. | Trending Factor | | 1.0320000 |
| 6. | All Other Costs Trended - calculated | \$ | 5,413,899.86 |
| 7. | Indexing Factor | | 1.0280000 |
| 8. | All Other Costs Indexed | \$ | 5,565,489.06 |
| 9. | Capital Costs | \$ | 740,757.00 |
| 10. | Total All Other Costs (Trended and Indexed) | \$ | 6,306,246.06 |
| 11. | Patient Days | | 13,263 |
| 12. | All Other Cost Per Diem | \$ | 475.48 |

Payment Rate Computation

| | | | |
|------------|--|----|--------|
| 1. | Nursing Services Per Diem Payment Rate | \$ | 468.35 |
| 2. | All Other Cost Per Diem Rate | \$ | 475.48 |
| TOTAL RATE | | \$ | 943.83 |